



APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a b	elow	named	inventor,	Ι.	hereby	declare	that:
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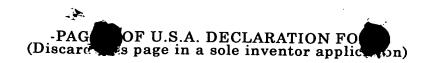
My residence, post-office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

		PREAD ILL	UMINATING APPA	RATUS		
described an	d claimed i	n the specificatio	n:			
Check one						
*a. [🛚 attached	hereto.				
b. [\square filed on .		as Application No	and	amended on	
					(if applicable)	
I her	eby state tl	at Nave review	ed and understand the co	ntents of the above-ide	entified specification, including the	claim
as amended	by any ame	endment referred	to above.			
I ack	nowledge t	he duty to disclo	se to the Office all inform	ation known to me to	be material to patentability as def	ined
little 37, Co	de of Fede	ral Regulations,	§1.56. Under Title 35,	U.S. Code §119, the r	priority benefits of the following	foreig
application(s) and/or Un	ited States provi	sional application(s) filed v	vithin one year prior to	this application are hereby claimed	1:
Ja	ipanese Pa	tent Application 1	No. 2000-30541 filed on Fe	ebruary 8, 2000		
					ere filed in countries foreign to the ne filing date of the above-named	
The f	ollowing ap	plication(s) for pa	atent or inventor's certifica	ate on this invention we	ere filed in countries foreign to the	Unite
States of Am	erica eithe	r (a) more than o	one year prior to this app	lication, or (b) before tl	ne filing date of the above-named	foreig
priority appli	cation(s) ar	nd/or United Stat	atent or inventor's certification or inventor to this applies provisional application (s):		_
1 nere	eby appoint	the following as	my attorneys of record	with full power of subs	titution and revocation to prosecu	te thi
pplication a	nd to trans	act all business ir	the Patent Office:			
:	James A				I. Hudson, Reg.No.27,562;	
		Thomas J. P	ardini, Reg.No.30,411; and	l Edward P. Walker, Re	g.No.31,450.	
ALL CORRE	SPONDEN	ICE IN CONNE	CTION WITH THIS APP	LICATION SHOULD I	BE SENT TO OLIFF & BERRIDG	E, P.C
3OX 19928, <i>I</i>	ALEXAND	RIA, VIRGINIA,	22320, TELEPHONE (70	3) 836-6400.		
	h Jl	(L_ATL	1 1 1			
	by declare	that I have revie	wed and understand the o	ontents of this Declarat	ion, and that all statements made	herei
n my own ki	iowieage a	re true and that	all statements made on 1	ntormation and belief	are believed to be true; and further	r tha
mese statem	ents were	nade with the k	nowledge that willful fall	se statements and the	like so made are punishable by i	ine o
mprisonmen	t, or both,	under Section 1	001 of little 18 of the Ur	nted States Code and	that such willful false statement	s may
eopardize the	e vancity of	the application of	r any patent issued thereo	on.		
Ypewritten I	Zull Mama					
f Sole or Firs		Shingo			SUZUKI	
		Given Name		Middle Initial	Family Name	
*Inventor's S	Signature		Shingo	Suguror		<u>.</u>
* Date of Sig	nature	January		24	2001	
	.	Month		Day	Year	
Residence .	Iwata-gun			Shizuoka-ken	Japan	
itizenship	City Japanese			State of Province	Country	
_ ·	fice Addres	s c	o Minebea Co Ltd Hama	matsu Manufacturing	Unit . 1743-1 Asana, Asaba-cho.	
	sert comple	-	vata-gun, Shizuoka-ken, J		XXXX A AXXIIII, ASSURTIU,	
•	-	uding country)				

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to Inventor. Please sign name exactly as it appears above and insert actual date of signing.



Typewritten ruii Name		
of Second Joint		
Inventor (if any) Koichi		TOYODA
Given Name	Middle Initial	Family Name
**Inventor's Signature	Koichi Yosoda	•
*Date of Signature January		2001
Month	Day	Year
ResidenceIwata-gun	Shizuoka-ken	
City	State or Province	Japan Country
Citizenship <u>Japanese</u>		·
Post Office Address <u>c/o Minel</u>	bea Co., Ltd. Hamamatsu Manufacturing Unit,	1743-1 Asana, Asaba-cho.
(Insert completing mailing Iwata-gu	n, Shizuoka-ken, Japan	
address, including country)		
Typewritten Full Name		
of Third Joint		
Inventor (if any)		
Given Name	Middle Initial	E 7 M
		Family Name
**Inventor's Signature* Date of Signature		
Month	De	
	Day	Year
Residence	G	
Citizenship	State or Province	Country
Insert completing mailing		
address, including country)		
Typewritten Full Name of Fourth Joint Inventor (if any)		
Given Name	Middle Initial	Family Name
"*Inventor's Signature		
Date of Signature		
Month	Day	Year
Residence		
City	State or Province	Country
Insert completing mailing		
ddress, including country)		
ypewritten Full Name		
f Fifth Joint		
nventor (if any)		
Given Name	Middle Initial	Family Name
*Inventor's Signature		2
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Post Office Address		
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ddress, including country)		

^{**} Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of attorney form of the application to which it pertains.